



**STATE OF NEW HAMPSHIRE
DEPARTMENT OF SAFETY
DIVISION OF FIRE STANDARDS & TRAINING
BUREAU OF EMERGENCY MEDICAL SERVICES**

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**TRAUMA MEDICAL REVIEW COMMITTEE
COMMITTEE MEETING**

June 15, 2005
Richard M. Flynn Fire Academy
Concord, New Hampshire

Members Present: John Sutton, MD, John DeSilva, Rosie Swain, Sharon Phillips, RN

Guests: Janet Houston, Sue Barnard, RN, David Reichel, Bill Brown, Richard Ciampa, RN

Bureau Staff: Sue Prentiss, EMTP, Bureau Chief, Clay Odell, EMTP, RN

I. Call to Order

Item 1. The meeting of the Trauma Medical Review Committee was called to order by Dr. Sutton at 9:35 am on Wednesday June 15, 2005 at the Richard M. Flynn Fire Academy in Concord, NH.

Item 2. Introductions: Attendees introduced themselves. Two members new members of the TMRC were present; Sharon Phillips, RN, representing the Trauma Nurse Coordinators, and Rosie Swain who was appointed to represent the Office of the Medical Examiner. Welcome to both new members.

Item 3. Minutes. The minutes of the February 2005 meeting were approved by email by all who attended that meeting, and were distributed by e-mail prior to this meeting. There was no discussion regarding the minutes. The April 2005 meeting had been cancelled.

II. Committee Discussion Items

Item 1. NH Bureau of EMS Update: Bureau Chief Sue Prentiss stated that her report would be distributed for members to read at their leisure and went over some highlights of the report.

She discussed two pieces of state legislation affecting EMS and gave the status of those bills in the legislative process. HB 257 deals with EMS Protocols and Rulemaking as well as quality improvement. SB 88 enables some hospitals to allow emergency nurses to function as one of two providers on an ambulance for interfacility transfer. The process has several restrictions but could have some impact in interfacility transport in rural areas.

Sue also discussed the National Registry's plan to implement computer based testing at all levels of EMS provider. The Bureau is facilitating discussions with the EMS community through presentations to the EMS I/C's, placement of a Powerpoint presentation on the website and conducting a "town meeting" discussion this fall.

Sue discussed the status of the TEMSIS project on behalf of Fred von Recklinghausen who is at a national CODES meeting.

Dr. Sutton asked about training funds that were part of the legislation that created the funding mechanism for the Division of Fire Standards and Training and EMS. Sue replied that the nature of training of firefighters in the state is different than EMS training. Traditionally the state has been the provider of a substantial percentage of fire training programs. On the other hand, EMS training has traditionally been provided by the free market. EMS educators in NH have been resistant to the state taking over EMS training.

Recently, however, the state has been engaged in conducting some EMS training such as the upcoming EMS Management Lecture Series, and will continue to look for opportunities to provide subsidized EMS education.

Item 2. Renewal and Hospital Updates Clay Odell announced that all of the hospitals whose trauma assignment has expired have now been sent a renewal application.

Clay attended the Trauma Committee meeting at Southern NH Medical Center and discussed the alternative criteria for Level II Neurosurgical coverage. The Committee agreed to adopt the plan. Based on that agreement SNHMC was awarded renewal as a Level II Trauma Hospital. Bill Brown, EMS Coordinator of SNHMC was in attendance at today's meeting and was given the framed certificate of award.

Cheshire Medical Center has submitted their application electronically and a review by Clay and Dr. Sutton will be scheduled. Sharon Phillips said that Concord Hospital had completed their application and are obtaining signatures from the appropriate parties and will submit the application very soon.

Item 3. Legislative Action

Clay reports that there has been little action on the federal level to restore funding of the funding to support the HRSA Trauma/EMS program that was zero-budgeted in the President's budget. The American College of Surgeons has written a letter on behalf of a number of supporting organizations to influential legislators asking them to submit a bill restoring funding of the 3.5 million dollar budget. EMS for Children, which faced a similar problem, has been successful in getting a bill submitted to the Senate to restore that program's funding (23 million dollars).

III. Old Business

Item 1. Intersections Collaborative Dr. Joseph Sabato, Chair of the Emergency Medical and Trauma Services Coordinating Board was a guest invited to speak about the entity he leads known as the Intersections Collaborative. He gave the history of the organization beginning from a national roundtable which brought public safety and public health together. He brought that initiative to NH with an emphasis on EMS, public safety and public health collaboration. That initiative has been going on for four years now.

One of the accomplishments of the Intersections Collaborative has been two annual conferences dedicated to the subject of impaired driving. Several positive outcomes have come about as a result of the conferences, including legislation to create a medical advisory board to advise state administrators about medical impairments to driving.

Dr. Sabato also spoke about the Enhanced EMS Public Health education program that was held last year and had previously been introduced to the TMRC. He said the program was very successful and that the group is seeking options to continue with this training.

Dr. Sutton asked about the success of the fire service in reducing fire deaths and how did that translate to use in EMS. Dr. Sabato replied that the best injury prevention programs, including fire prevention, were multifactorial, and would include engineering and legislative changes, but also required education, which was where community based providers, particularly those with a close tie to the care of the injured patient, are an important factor as well.

Item 2. Interfacility Transport Task Force At the 2004 NH Trauma Conference one of the breakout group issues of substantial concern was a perceived increase in difficulty arranging for interfacility ambulance transport, particularly of serious trauma and critically ill patients.

In March the NH Bureau of EMS facilitated a multidisciplinary stakeholder's conference to discuss the issue and brainstorm on potential solutions using group dynamic tools. Invitees to the program included hospital administrators, ED physicians, ED nurse managers, EMS system leaders and State Legislators. The meeting was well attended and participants came up with a list of challenges and potential solutions.

A smaller multidisciplinary group was subsequently established to continue that work. The first meeting of that task force occurred in May and the second meeting is scheduled for next week. The group has targeted several priority areas and will be creating work plans to accomplish those tasks.

IV. New Business

Item 1. St. Joseph Hospital Trauma Assignment Renewal Application: The TMRC members reviewed St. Joseph Hospital's renewal application. Dr. Sutton and Clay Odell had previously reviewed the application and had contacted St. Joe's Trauma

Coordinator for clarification. Sue Barnard, RN, Trauma Coordinator subsequently submitted an addendum to the application and attended today's TMRC meeting to answer questions.

The application was deemed acceptable and John DeSilva motioned to approve the application, with a second by Sharon Phillips. The motion passed unanimously.

Dr. Sutton made a suggestion to Ms. Barnard that St. Joes' Trauma QI Committee take a close look at trauma transfers, particularly neurotrauma patients as part of their continuing performance improvement process.

Item 2. NH EMS for Children Project Janet Houston, Director of the NH EMS-C Project wanted to alert TMRC members of several initiatives on the national level that would have an impact on the NH Trauma System. The national EMS-C program is moving to require states to provide performance measures regarding the care of seriously ill or injured children.

- The program will be seeking written interfacility agreements from all hospitals in the state. They will also be seeking interfacility transfer guidelines. The NH Trauma Plan currently requires Level I through Level III hospitals to have triage guidelines for the treatment and transport of serious trauma patients.
- They are looking for recognition that hospitals are capable of managing pediatric emergencies.
- They are seeking data collection of patient care activities from prehospital through to hospital discharge. Janet said she doesn't know if that data would be capable of being captured through already existing databases or not.

This was informational at this time and requires no action.

Item 3. Trauma Conference The TMRC discussed planning for the annual statewide Trauma System stakeholder's conference. The traditional date of the second Wednesday in November conflicted with the New England Trauma Symposium. The date that was selected for the NH Trauma Conference was November 16th, with a backup date of October 26th.

Topics suggested were interfacility transport, national trends in trauma care, trends in the General Surgery/Critical Care model, national trends in basic neurosurgical care by general surgeons, examples of community/EMS-based injury prevention programs that work, and an initial look at how TEMSIS is working.

Dr. Sutton asked members and guests to consider a good keynote speaker and email any recommendations to Clay. Clay will be establishing a planning committee soon.

V. Public Comment

None

VI. Adjournment

Dr. Sutton adjourned the meeting at 11:45. He advised the group that the next meeting of the Trauma Medical Review Committee will be held at the Richard M. Flynn Fire Academy on Wednesday August 17th, however after the meeting was adjourned scheduling conflicts were discovered and the meeting date was changed to August 10th. Clay will make contact with all parties and make changes on the website schedule.

Respectfully submitted:

Clay Odell, EMTP, RN
Trauma Coordinator